

America, as well as in the Antilles, all of which will be represented at the congress.

One of the recent accomplishments of the Pan-American Medical Association is the establishment of the Pan-American Hospital in New York City for the benefit of the Latin-speaking people.

International Medical Postgraduate Courses in Berlin are arranged with the help of the medical faculty of the university by the Lecturers' Association for medical continuation courses and the Kaiserin Friedrich-Haus. Part of the courses take place permanently, part only in March and April, 1929.

The courses are held in German, but numerous professors are able to lecture in the English, French, and Spanish languages.

The information bureau of the Kaiserin Friedrich-Haus für das ärztliche Fortbildungswesen, Berlin NW 6, Luisenplatz 2-4 is instrumental in procuring suitable lodgings, gives information as to cost of stay, arranges the attendance in clinics at operations, etc., and, upon desire, sends detailed syllabuses.

MEDICAL ECONOMICS

A New Course for the Medical Faculty.—When the average medical student has received his diploma and degree he feels that success is at hand and no more worries and difficulties are forthcoming.

He feels that he knows about all there is to be known in his profession. He is of the opinion that when he gets into practice his word will be authority and people will flock to him for advice.

But as soon as he picks up his hat and diploma and goes out to look for a location, his difficulties begin. Prior to this the problems of becoming located and established looked easy enough. Now he finds that, although he has learned the science of medicine thoroughly and well, he is hopelessly at sea when it comes to the art of medicine.

He has had no experience regarding actual contact with patients. He may know the manners and etiquette of society well enough, yet when it comes to meeting and dealing with his patients there is a vast difference.

Sick folks are in need of a special type of psychology and behavior on the doctor's part. He must be courteous, cheerful, sympathetic, honest, gentle. To approach a patient in a gruff, cold, scientific attitude creates a wrong impression. The patient becomes fearful, distrustful, and regrets having come. He often feels that the physician is more interested in his pocketbook than in his disease.

To be sure every physician should be interested in the financial end of his practice, but not to the extent of injuring his standing or his patient's feelings, unless, of course, he has a dead-beat patient. His patients want to be considered first and foremost when they come to see him, and it is his business to show them every attention.

When he is going to college the young man sees patients galore, but not private patients, and there is a great difference. His practical work brings him into contact with patients in charity wards and out-patient departments where they are herded together, examined, diagnosed and treated with little or no idea of courtesy, practically no sympathy or gentleness, and with the thought of getting them out of the way as fast as possible.

He has no thought or care of ever seeing them again. Often he becomes so imbued with these ideas and attitudes that he carries them on into his own

practice. It is only after some very bitter experiences that he realizes his failing and attempts to mend his ways.

Who is responsible for this state of affairs? The medical college largely because there is little or no place in all its curriculum where the real art of medicine is imparted.

How can this be remedied? One way is to establish a so-called medical arts course in which every student is instructed as far as possible in the theoretic and practical side of the art of medicine. This instruction should be under the leadership of men of wide practical experience and who are known as artists in dealing with patients.

A still better method perhaps would be for every graduate in medicine, after finishing his internship, to associate himself for at least a year with an ethical physician of wide practical experience and a large clientele.

He would learn the niceties, courtesies and policies that could never be learned as quickly in any other way. By so doing, his success as a practicing physician would be much surer and easier.

Another phase of the profession that is sadly neglected is the business side. I doubt if there is a class of professional men who are so deficient in the business end of their work as are doctors. No class of men are so gullible and make such bad investments. No class of men spend their income so unwisely.

Why? Because they have had little or no training during all their courses in the principles of business. The business terms and phraseology which should be understood and used by everyone are often misunderstood and misapplied by medical men, young ones especially. There is probably no class of men who keep their accounts so haphazardly. Doctors are poor collectors and often they carry thousands of dollars on their books indefinitely. People have learned this and as a consequence the doctor is the last to be paid, and often is never remunerated.

A valuable course that every medical college would do well to institute is a business course for physicians in which every student would learn the basic principles of business as applied to a doctor's office. The course should include in a brief way principles relative to medico-legal procedures—narcotic laws, fee splitting, statistical records, coroner's inquests, medical society proceedings and the like. It should also include in a summary manner the code of medical ethics.

It would seem that at present the average medical curriculum is as full as it possibly can be, but I believe that there is no college that could not give at least one hour and perhaps two hours a week during each semester for such a course. I have no doubt that it would be very popular as well as practical, and every student would be eager to use such a course.

A so-called elective course that would find a good deal of favor among students of medical colleges might be designated as a medical literary course, in other words, a course that would prepare students for writing and lecturing on subjects concerning medicine and allied sciences.

Every medical man sooner or later finds himself confronted with the desire or necessity of writing case records, reporting scientific investigations and discoveries, giving papers and lectures, and so on. Few are really prepared. It is a reflection on the English language to note the way some material in our scientific magazines is written by college-bred individuals.—L. L. McCoy, M. D., Reprinted from *Medical Economics*.